


<b>CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)</b>			<b>Docket No.</b> 99B065/2
Applicant(s): <b>Mozeleski, et al.</b>			
<b>Application No.</b> 09/750,567	<b>Filing Date</b> December 26, 2000	<b>Examiner</b> Taylor V. Oh	<b>Group Art Unit</b> 1625
Invention: <b>Production of Esters</b>			
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APR 07 2005			
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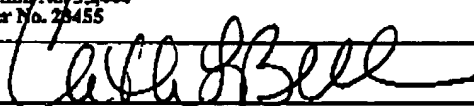
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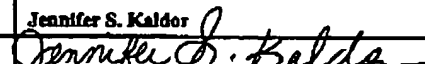
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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/750,567	
	Filing Date	December 26, 2000	
	First Named Inventor	Edmund J. Moseleski	
	Art Unit	1625	
	Examiner Name	Taylor V. Oh	
Total Number of Pages in This Submission	16	Attorney Docket Number	99B065/2

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">         Certificate of Transmission (by facsimile)       </div>
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Signature		Date	April 7, 2005

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	MOZELESKI ET AL.	§	Confirmation No. 6491
Serial No.:	09/750,567	§	Group Art Unit: 1625
Filed:	December 26, 2000	§	Examiner: Taylor V. Oh
For:	PRODUCTION OF ESTERS	§	Attorney Docket No. 99B065/2
		§	Customer No. 23455
		§	April 7, 2005

## AMENDMENT AND RESPONSE UNDER 37 CFR §1.116

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

This amendment is submitted in response to the Office Action dated February 7, 2005. Applicants respectfully request reconsideration of the application in light of the following amendments and remarks.

**Amendments to the Claims** begin on page 2 of this paper.

**Remarks** begin on page 10 of this paper.